

# Nashville Area Association for the Education of Young Children

NAAEYC

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## 8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS

State the aggregate total amount of all employer expenditures for all in-State event(s) which was or should have been reported to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Authority: T.C.A. § 3-6-303(a)(3).

N/A (not applicable)

## 9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a witness)

I certify that the information contained in this Report is true and that it is a complete and accurate report to the best of my knowledge, information and belief.

*Rhonda Laird*

5/23/07

Signature of Person Completing Report

Date

Print Name of Person: Rhonda Laird

I, the undersigned, acknowledge that I have reviewed the foregoing Report and certify that is complete and accurate to the best of my knowledge, information and belief.

*Rhonda Laird*

5/23/07

Signature of CEO, CFO or Authorized Representative

Date

Print Name of Person: Rhonda Laird

I, Lori DuBois, the undersigned, do hereby witness the above signature of the CEO,  
(Printed Name of Witness) CFO or Authorized Representative, which was signed in my presence.

*Lori DuBois*

5/23/07

Signature of Witness

Date



SS-8011

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2007 MAY 30 AM 8:15  
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